2011 Medicare Part D Stand-Alone Prescription Drug Plans

Data as of Sept. 15, 2010. Includes all contracts/plans regardless of 2011 approval status Employer sponsored plans (800 series) are excluded.

Note: Always check details and formulary (list of covered drugs) with Medicare (1-800-633-4227 or www.medicare.gov) and the plan at the contact information listed below.

Statewide Health Insurance Ber

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- Plans under the Centers for Medicare and Medicaid Services (CMS) sanction are listed last.
- Plans with "basic" benefit types offer coverage equal to Medicare's basic requirements.
- Plans with "enhanced" benefit types offer additional coverage beyond Medicare's basic requirements (i.e., coverage for Part D excluded drugs). This coverage varies by plan, and may require you to pay higher premiums.
- "Benchmark" plans are "basic" plans with monthly premiums below the average amount calculated for each region. This allows Extra Help (also called Low-Income Subsidy or LIS) clients to enroll and pay little or no monthly premium.
- Data are subject to change as Medicare finalizes contracts.
- Costs listed in this publication may be less for people who qualify for Extra Help.
- * YES in this column indicates a "Benchmark" plan.
- * People with Extra Help pay lower or no monthly premiums for Benchmark plans.
- *** People with Extra Help have yearly deductibles from \$0-63, for any plan they choose.
- **** People with Extra Help have no coverage gap (also referred to as the donut hole) for any plan they choose.

Company Name	Plan Name	Benefit Type	\$0 Prem. with Full Extra Help? *	Monthly Drug Premium **	Annual Drug Deductible ***	Additional Drug Coverage Offered in The Gap	Contract ID	Plan ID
Asuris Northwest Health 1-866-704-2708 TTY/TDD: 1-800-382-1003 www.asuris.com/medicareScript	Asuris Medicare Script (PDP)	Basic		\$76.50	\$130	No Gap Coverage	S5609	001
Asuris Northwest Health 1-866-704-2708 TTY/TDD: 1-800-382-1003 www.asuris.com/medicareScript	Asuris Medicare Script Enhanced (PDP)	Enhanced		\$104.50	\$0	Many Generics	S5609	002
CIGNA Medicare Rx 1-800-735-1459 www.cignature-rx.com	CIGNA Medicare Rx Plan One (PDP)	Basic		\$51.60	\$310	No Gap Coverage	S5617	148
CIGNA Medicare Rx 1-800-735-1459 www.cignature-rx.com	CIGNA Medicare Rx Plan Two (PDP)	Enhanced		\$75.10	\$0	Few Generics	S5617	200

Company Name	Plan Name	Benefit Type	\$0 Prem. with Full Extra Help? *	Monthly Drug Premium **	Annual Drug Deductible ***	Additional Drug Coverage Offered in The Gap	Contract ID	Plan ID
EnvisionRx Plus 1-866-250-2005 TTY/TDD: 1-866-763-9630 www.envisionrxplus.com	EnvisionRxPlus Silver (PDP)	Basic		\$45.30	\$310	No Gap Coverage	S7694	030
EnvisionRx Plus 1-866-250-2005 TTY/TDD: 1-866-763-9630 www.envisionrxplus.com	EnvisionRxPlus Gold (PDP)	Enhanced		\$77.00	\$150	Many Generics	S7694	064
First Health Part D 1-800-588-3322 TTY/TDD: 1-888-788-4010 www.firsthealthpartD.com	First Health Part D Premier Plus (PDP)	Enhanced		\$94.10	\$0	Some Generics and Some Brands	S5674	047
First Health Part D 1-800-588-3322 TTY/TDD: 1-888-788-4010 www.firsthealthpartD.com	First Health Part D Premier (PDP)	Basic	YES	\$30.30	\$150	No Gap Coverage	S5768	123
Health Net 1-800-606-3604 TTY/TDD: 1-800-929-9955 www.healthnet.com	Health Net Orange Option 1 (PDP)	Basic		\$37.70	\$310	No Gap Coverage	S5678	006
Health Net 1-800-606-3604 TTY/TDD: 1-800-929-9955 www.healthnet.com	Health Net Orange Option 2 (PDP)	Enhanced		\$79.80	\$0	No Gap Coverage	S5678	012
HealthSpring Prescription Drug Plan 1-800-331-6293 TTY/TDD: 1-866-845-7230 www.healthspring.com	HealthSpring Prescription Drug Plan-Reg 30 (PDP)	Basic	YES	\$30.10	\$310	No Gap Coverage	S5932	029

Company Name	Plan Name	Benefit Type	\$0 Prem. with Full Extra Help? *	Monthly Drug Premium **	Annual Drug Deductible ***	Additional Drug Coverage Offered in The Gap	Contract ID	Plan ID
Humana Insurance Company 1-800-706-0872 TTY/TDD: 1-877-833-4486 www.humana-medicare.com	Humana Enhanced (PDP)	Enhanced		\$42.90	\$0	Few Generics	S5884	028
Humana Insurance Company 1-800-706-0872 TTY/TDD: 1-877-833-4486 www.humana-medicare.com	Humana Complete (PDP)	Enhanced		\$118.60	\$0	Many Generics and Some Brands	S5884	058
Humana Insurance Company 1-800-706-0872 TTY/TDD: 1-877-833-4486 www.humana-medicare.com	Humana Walmart- Preferred Rx Plan (PDP)	Basic	YES	\$14.80	\$310	No Gap Coverage	S5884	113
Medco Medicare Prescription Plan 1-800-758-3605 TTY/TDD: 1-800-716-3231 www.yourxplan.com	Medco Medicare Prescription Plan - Value (PDP)	Basic		\$38.00	\$310	No Gap Coverage	S5660	132
Medco Medicare Prescription Plan 1-800-758-3605 TTY/TDD: 1-800-716-3231 www.yourxplan.com	Medco Medicare Prescription Plan - Choice (PDP)	Enhanced		\$108.20	\$250	Many Generics	S5660	200
RxAmerica (CVS Caremark) 1-877-279-0370 www.meds4medicare.com	Advantage Star Plan by RxAmerica (PDP)	Basic		\$48.80	\$310	No Gap Coverage	S5644	083
SilverScript Insurance Company 1-866-552-6106 TTY/TDD: 1-866-552-6288 www.silverscript.com	CVS Caremark Value (PDP)	Basic	YES	\$33.20	\$310	No Gap Coverage	S5601	060

Company Name	Plan Name	Benefit Type	\$0 Prem. with Full Extra Help? *	Monthly Drug Premium **	Annual Drug Deductible ***	Additional Drug Coverage Offered in The Gap	Contract ID	Plan ID
SilverScript Insurance Company 1-866-552-6106 TTY/TDD: 1-866-552-6288 www.silverscript.com	CVS Caremark Plus (PDP)	Enhanced		\$75.60	\$0	Many Generics	S5601	061
Sterling Life Insurance Company 1-888-909-1713 TTY/TDD: 1-888-858-8567 www.sterlingplans.com	Sterling Rx (PDP)	Basic		\$40.10	\$100	No Gap Coverage	S4802	020
UniCare 1-888-949-5384 TTY/TDD: 1-800-297-1538 www.unicare.com	MedicareRx Rewards Standard (PDP)	Basic		\$38.10	\$310	No Gap Coverage	S5960	136
UniCare 1-888-949-5384 TTY/TDD: 1-800-297-1538 www.unicare.com	MedicareRx Rewards Plus (PDP)	Enhanced		\$61.70	\$0	Some Generics	S5960	159
United American Insurance Co. 1-866-299-3406 TTY/TDD: 1-866-524-4170 www.uamedicarepartd.com/	UA Medicare Part D Prescription Drug Cov (PDP)	Basic		\$49.60	\$50	No Gap Coverage	S5755	033
UnitedHealthcare 1-866-255-4835 TTY/TDD: 1-877-730-4192 www.aarpmedicarerx.com	AARP MedicareRx Preferred (PDP)	Basic	YES	\$35.10	\$0	No Gap Coverage	S5820	029
UnitedHealthcare 1-866-255-4835 TTY/TDD: 1-877-730-4192 www.aarpmedicarerx.com	AARP MedicareRx Enhanced (PDP)	Enhanced		\$93.20	\$0	Some Generics	S5921	023

Company Name	Plan Name	Benefit Type	\$0 Prem. with Full Extra Help? *	Monthly Drug Premium **	Annual Drug Deductible ***	Additional Drug Coverage Offered in The Gap	Contract ID	Plan ID
Universal American 1-866-684-5353 TTY/TDD: 1-866-684-5351 www.communitycarerx.com	Community CCRx Basic (PDP)	Basic	YES	\$33.00	\$310	No Gap Coverage	S5803	099
Universal American 1-866-684-5353 TTY/TDD: 1-866-684-5351 www.communitycarerx.com	Community CCRx Choice (PDP)	Enhanced		\$79.00	\$0	No Gap Coverage	S5803	167
WellCare 1-888-293-5151 TTY/TDD: 1-888-816-5252 www.wellcarepdp.com/	WellCare Signature (PDP)	Enhanced		\$61.30	\$0	No Gap Coverage	S5967	064
WellCare 1-888-293-5151 TTY/TDD: 1-888-816-5252 www.wellcarepdp.com/	WellCare Classic (PDP)	Basic	YES	\$34.80	\$310	No Gap Coverage	S5967	167
Aetna # www.aetnamedicare.com	Aetna Medicare Rx Costco Plus Plan (PDP)	#	#	#	#	#	S5810	234
Aetna # www.aetnamedicare.com	Aetna Medicare Rx Premier (PDP)	#	#	#	#	#	S5810	200
Aetna # www.aetnamedicare.com	Aetna Medicare Rx Essentials (PDP)	#	#	#	#	#	S5810	64

[#] Information not available as plan is currently under CMS sanction.

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